

Center for Health Information Technology & Innovative Care Delivery

Announcement for Grant Applications

Telehealth

The Maryland Health Care Commission (MHCC) is seeking applications to demonstrate the impact of telehealth use on increasing access to health care and improving population health in rural communities. Submission of primary care and behavioral health related use cases are encouraged.

Grant ID Number: MHCC 17-004

Issue Date: August 4, 2016

Title: Telehealth Technology Project - Round Five

Letter of Intent Due: August 25, 2016

Final Application Due: September 29, 2016

Application and information on MHCC telehealth grants are available at: http://mhcc.maryland.gov/mhcc/pages/home/procurement/procurement.aspx

Table of Contents

I.	About the Maryland Health Care Commission 1		
II.	Background1		
III.	Proposal Request1		
IV.	Overview2		
V.	Requirements3		
VI.	Tasks		
	A. Required to be considered for award3		
	B. Key tasks following award5		
	C. Key tasks required throughout the duration of award5		
	D. Change in Scope Request6		
VII.	Required Qualifications6		
VIII.	Key Tasks and Due Dates6		
IX.	Staffing and Personnel Requirements		
X.	Term of Grant		
XI.	How to Apply8		
	A. Requirements for Letter of Intent8 – 9		
	B. Requirements for Application9 –11		
XII.	Conditions of Award		
XIII.	Attachments		

I. ABOUT THE MARYLAND HEALTH CARE COMMISSION

The Maryland Health Care Commission (MHCC) is an independent regulatory agency whose mission is to plan for health system needs, promote informed decision-making, increase accountability, and improve access in a rapidly changing health care environment by providing timely and accurate information on availability, cost, and quality of services to policy makers, purchasers, providers and the public. The Center for Health Information Technology and Innovative Care Delivery (Center) is one of four Centers within MHCC, and is responsible for advancing health information technology (health IT) statewide. The Center's role is to advance a strong, flexible health information technology ecosystem that can appropriately support clinical decision-making, reduce redundancy, enable payment reform, and help to transform care into a model that leads to a continuously improving health system. In addition, the Center fosters innovation in a way that balances the need for information sharing with the need for strong privacy and security policies.

II. BACKGROUND

In October, 2014, the Telemedicine Task Force (Task Force), convened by MHCC and the Maryland Health Quality and Cost Council, released a report outlining 10 telehealth use cases that could be implemented as pilot projects to demonstrate the value of telehealth. The Task Force recommended that pilot projects be funded to help accelerate diffusion of telehealth throughout the State. The use cases have been utilized by MHCC in framing requests for proposals for telehealth grants. Since 2014, MHCC has issued four rounds of grants for telehealth projects to test the effectiveness of certain use cases and to help inform future use of telehealth in the State. Summaries of round one through four grants can be accessed on MHCC's Telehealth Grants page. Experience gained from implementing these projects enables: 1) better practices and industry implementation efforts; 2) potential policies to support the advancement of telehealth; and 3) the design of large telehealth programs and projects across the State.

III. PROPOSAL REQUEST

The MHCC intends to competitively award one or more grants to demonstrate the impact of using telehealth to increase access to health care and improve population health in rural communities. Submission of primary care and behavioral health related use cases are encouraged. The proposed use case must serve patients in at least one of the counties located on the eastern shore of Maryland (i.e., Caroline, Cecil, Dorchester, Kent, Queen Anne's, Somerset, Talbot, Wicomico, and Worcester). The total funding amount for this grant announcement is \$100,000 for an 18-month period; applicants are required to include a 2:1 match of funds and demonstrate sustainability of the project. The proposal should be a new use case that is not similar to other MHCC telehealth award use cases, as described on MHCC's Telehealth Grants webpage.

A Letter of Intent (LOI) and completed cover page (Attachment A) is required prior to completion of the full application. After review of the submitted LOI's, MHCC will extend invitations for full proposals to selected applicants. The criteria for the LOI and full proposals is included with this announcement. Applicants should review the full application proposal requirements prior to submitting an LOI. Questions related to the grant application should be sent to christine.karayinopulos@maryland.gov. Questions and answers will be posted, through the application deadline, on the MHCC Procurement webpage at: http://mhcc.maryland.gov/mhcc/pages/home/procurement/procurement.aspx

IV. OVERVIEW

Cover Page	A completed cover page (Attachment A) must be completed and submitted with the Letter of Intent (LOI).		
Letter of Intent	LOIs will be screened for responsiveness and fit to program goals. Only those invited will be		
Detter of intent	encouraged to submit full applications.		
Summary	The MHCC is seeking grant applications to demonstrate the impact of using telehealth to		
	increase access to health care and improve population health in rural communities.		
	Submission of primary care and behavioral health related use cases are encouraged. The		
	use cases must serve patients in the six counties of the eastern shore (Kent, Queen Anne's,		
	Talbot, Caroline, Dorchester, and Worcester). Demonstrated sustainability of the project is a		
	requirement of the applicants.		
Applicant Resources			
	grant award use cases, which are described on MHCC's telehealth grant webpage at:		
	http://mhcc.maryland.gov/mhcc/pages/hit/hit_telemedicine/hit_telemedicine_grants.aspx		
	The Telehealth Grant Announcement Round 5 is available here:		
	http://mhcc.maryland.gov/mhcc/pages/home/procurement/procurement.aspx		
	Attachment A is available here: <u>Attachment A</u>		
	The required Excel attachments are available here: <u>Attachments B-E</u>		
Key Dates	Announcement Published: August 4, 2016		
	LOI and Attachment A Deadline: August 25, 2016		
	Invitation to Apply: September 9, 2016		
	Full Application Deadline: September 29, 2016		
	Awards Announced: October 20, 2016		
	*Deadlines are at 5 p.m. (ET)		
Maximum Project	\$100,000		
Budget	Fund 1 to 3 projects		
Funding	1. 2:1 Match		
Requirements	2. Maximum of 20% of match in-kind IT services or non-reimbursable clinical hours		
	3. Match may not include other grant funds		
Project Period	18 months		
Overview of Grant	1. Unique telehealth use-case (not previously funded)		
Elements	2. Supports the use primary care and/or behavioral health care		
	3. Serves patients in rural communities on the eastern shore of Maryland		
	4. Incorporates the use of CRISP and/or an EHR system		
	5. Identify 3 clinical goals		
	6. Aims to reduce hospital encounters, improve access to care, reduce costs and improve		
	access to care		
EAO	7. Demonstrates sustainability after completion of project		
FAQs	Please review FAQs posted on the MHCC Procurement webpage.		
Contact	For more information and answers to additional questions, please email		
	christine.karayinopulos@maryland.gov or call (410) 764-3444 . All questions and		
	responses will be posted and updated weekly on the MHCC Procurement webpage.		

V. REQUIREMENTS

An applicant must identify the prime recipient of the grant award and the participating organizations (collectively, the applicant). The application must specify the use case to be implemented, how the meaningful use of electronic health records (EHRs) support the use case, and how the applicant intends to integrate with the State-Designated health information exchange, the Chesapeake Regional Information System for our Patients (CRISP) and/or an EHR system.¹ During the grant period, grantees will be required to present the progress of their use case to MHCC and at the annual telehealth symposium. At the conclusion of the grant, awardees will be required to submit a report to MHCC that assesses the findings from the project, describes the impact of using telehealth on practice transformation, and sustainability approach.² The report is intended to serve as a framework for guiding providers in the adoption and meaningful use of telehealth in rural areas. The MHCC will provide grantees with a guidance document on the report content and structure.

VI. TASKS

A. To be considered for a grant award, an applicant is required to:

- 1. Propose a telehealth technology use case that meets the following requirements:
 - a. Is not similar to other MHCC telehealth award use cases, which are described on the MHCC's telehealth grant webpage at:
 http://mhcc.maryland.gov/mhcc/pages/hit/hit_telemedicine/hit_telemedicine_grants.aspx;
 - b. Serve patients in at least one of the counties located on the eastern shore of Maryland (i.e., Caroline, Cecil, Dorchester, Kent, Queen Anne's, Somerset, Talbot, Wicomico, and Worcester);
 - c. Enables the early provision of appropriate treatment;
 - b. Maximizes the use of telehealth; and
 - c. Aims to:
 - Reduce hospital emergency department visits, admissions, and readmissions;
 - Improve access to care;
 - Provide cost savings to patients and providers; and
 - Improve population health.
- 2. Secure a 2:1 financial match with a maximum of 20 percent of the match being: 1) in-kind technical professional hours provided by information technology (IT) staff or consultants; 2) clinical care hours attributed to work on the project in cases where the clinical care hours cannot be otherwise reimbursed through standard methods, such as carrier reimbursement; or 3) a combination of (1) and (2) above. Other grant funds cannot be used as match. ³

¹ CRISP enables clinical data to be available to appropriately authorized and authenticated health care providers anywhere in the State of Maryland. For more information on CRISP, refer to their website: crisphealth.org/.

 $^{^{\}rm 2}$ Report length is approximately 10 pages, which does not include appendices.

³ An example of how the financial match is implements is included in the Q & A document posted on the telehealth website.

- 3. Go-live with telehealth technology implemented and clinical protocols developed for the selected use case within 90 days of the award date, which includes enrolled participants/patients, if applicable.
- 4. Integrate telehealth system or related technology system with CRISP; e.g., EHR interface or participate in at least one of the CRISP services.
- 5. Identify and track at least three clinical goals of the project that can be evaluated pre-and post-implementation (including at certain intervals during the implementation) of telehealth technology. The quality measures for each goal should be clear and verifiable, and aligned with a project objective. An example is provided below.

The goals must:

- a. Include measure(s), key definitions for all terms of each measure, and a baseline definition (see table below for format); and
- b. Include a numerator and denominator, and identify how the numerator and denominator will be calculated. Some goals may be a target whole number that would not require a numerator and denominator.

Clinical Goals [Example: Reduce hospital emergency room visits, admissions, and readmissions]					
Measure	Key Definitions	Mechanism to Measure			
EXAMPLE	EXAMPLE	EXAMPLE			
Percent [increase/decrease] in [specific measure] Suggested Denominator: Total number of patients [that meet the use case participation requirements] within the [defined timeframe] Suggested Numerator: Number of patients [that received the intervention] Percent Change: A month performance period minus a month base line performance period from the prior year	Hospitalization: Hospital emergency department visits, admissions, and readmissions Hospital Readmissions: ED visits, admissions, and readmissions: 1: [Qualifiers] in the current month for the same or related condition to any acute care hospital Baseline: 1. [Qualifiers] in the same month of the prior year. The prior month refers to the same month in the prior year to the start of the project	participants plan to calculate the denominator including source of the data (e.g., calculated on a daily basis through the EHR, then totaled for each quarter) Numerator: How the project participants plan to calculate the numerator including source of the data (e.g., calculated on a daily basis through the EHR, then totaled for each quarter)			
[Whole number example]	Telehealth Use:	Describe how you will record the			
Total number of patients using telehealth services	Identify a whole number target on how many patients per month will utilize telehealth	number of patients using the technology.			

6. Identify and report monthly on project milestones including specific process measures, which MHCC will request be demonstrated at site visits. A sample is provided below.

Telehealth Project Monthly Technology Milestones				
Monthly Technology Milestones	Process Measures	Responsible Lead		
Month 1: Project set-up	Assess physical set-up of facility including clinical space, physical security, furniture and lighting	Name, Title (Project Manager, Technical Manager)		
	Assess equipment set-up	Technical Manager		
	Share draft of marketing materials	Project Director		

B. Key tasks following an award:

- 1. Participate in a kick-off meeting with MHCC staff.
- 2. Submit monthly milestone reports detailing items, MHCC may demonstration of the milestones during virtual and onsite meetings.
- 3. Submit a final assessment report at the conclusion of the grant that includes:
 - a. A description of the technology infrastructure used in the project, including EHRs, HIEs, and telehealth equipment;
 - b. Lessons learned, including impact on the target population;
 - c. Project implementation challenges, mitigation strategy, and results;
 - d. Efforts made to address cost savings to patients and providers and the relative success of these efforts;
 - e. Results of the assessment:
 - f. Progress in achieving clinical goals and other agreed upon or requested metric(s);
 - g. Sustainability model; and
 - h. Recommendations on elements of the project that could be replicated in with other population areas or alternative technologies.

C. Key Tasks required throughout the duration of award:

- 1. Host periodic site-visits, where MHCC will visit the facilities involved in the project, meet with project team, and the project team will demonstrate monthly milestones;
- 2. Participate in monthly virtual meetings to discuss project progress;
- 3. Respond to MHCC comments on the monthly site visit assessment form and return completed form to MHCC by date indicated;
- 4. Respond to MHCC action requests;
- 5. Participate in at least two educational events, meetings, or webinars to showcase and/or demonstrate the work of the project;
- 6. Submit reimbursement requests no less than quarterly and applicable supporting documentation; and

7. Submit monthly written updates demonstrating progress in utilization of telehealth technology, monthly milestones, and achieving the clinical goals in a format specified by MHCC, which will serve as an audit trail for both the grant award and matching funds.

D. Change in Scope Request:

If a grantee is interested in making changes to their program that differ from what is stated in their original application, a change of scope request with justification and any modifications to budget items must be submitted in writing by the grantee to MHCC for approval. The MHCC will approve requests at its discretion.

VII. REQUIRED QUALIFICATIONS

The applicant must have at least two of the three following qualifications:

- 1. Include a participant in the application with experience providing health services, preferably primary care and/or behavioral health, and willing to serve patients residing in rural areas of Maryland's eastern shore;
- 2. Demonstrated experience in the deployment of telehealth, EHRs, or HIE; and
- 3. Ability to employ or contract with the required staff included in Section IX of the announcement, and demonstrate at least five years relevant experience.

VIII. KEY TASKS & DUE DATES

Grant Tasks	Due Date	
Submit draft monthly milestone and clinical quality measures report	10/24/16	
Kick-off meeting – to discuss draft project plan	11/1/16	
Submit final monthly milestone and clinical quality measures report, including clinical baseline and goals	3/30/17	
Use case project		
Begin technology assessment, development and installation	11/01/16	
Present progress of grant at Telehealth Symposium	2/1/18	
Go live with telehealth technology and clinical protocols	1/30/17	
Conclude implementation of the project	3/16/18	
Final Report		
Draft	2/1/18	
Final	3/16/18	
MHCC Compiled report final draft	4/30/18	

Note: Grant tasks/due dates are tentative and subject to change at the discretion of MHCC, after discussion with the awardee, and are not listed within the table in any particular order.

IX. STAFFING AND PERSONNEL REQUIREMENTS

An applicant may propose to augment or revise the following list of required personnel.

Labor Categories	Description
Project Director	A senior level individual that will coordinate all aspects of the work and take
Project Director	responsibility for meeting the schedule of tasks.
Technical Manager	A management level individual with experience in managing technology deployment that can ensure staff training and utilization of the technology among all participants.
Clinical Consultant	A licensed health care practitioner that will work on the project, using the telehealth technology, and provide consultation to the Technical Manager to increase the effectiveness of the use of telehealth technology and redesign clinical processes.

X. TERM OF GRANT

The grant begins on or about **October 21, 2016** and will end **18 months after the grant award date.** Awardee submission of reimbursement requests may be submitted monthly and no less than quarterly utilizing the invoice template (<u>Attachment E</u>) which includes a description of the completed tasks in accordance with the Task Schedule in Section VIII, the date and the time period billed for and supporting documentation for requested funds and match contribution. The supporting documentation must be of a quality that will withstand an audit. The match contribution within each reimbursement request must reflect a 2:1 match for that time period. The MHCC will not reimburse all equipment costs in one lump sum; reimbursement requests for equipment costs must be equally distributed throughout the timeframe of the grant. All tasks and work performed, and all reimbursement request documentation included must be to the satisfaction of MHCC for reimbursement approval. Reimbursement requests for any outstanding award funds must be submitted the 15th of the month after the grant ends or the end date of an authorized extension of the grant period.

If it becomes necessary to revise this announcement for grant applications before the due date for applications, amendments will be announced on MHCC's website. Multiple and/or alternate applications will not be accepted. The MHCC will not be responsible for any costs incurred by an applicant in preparing and submitting an application or in performing any other activities relative to this grant notification. The MHCC reserves the right to cancel this announcement for grant applications, accept or reject any and all applications (in whole or in part) received in response to this announcement for grant applications, to waive or permit cure of minor irregularities, request additional information or modification to an application, and to conduct discussions with all qualified or potentially qualified grant applicants in any manner necessary to serve the best interests of MHCC and to accomplish the goals of this grant announcement.

Prior to an entity conducting business in the State, it must be registered with the Department of Assessments and Taxation, State Office Building, Room 803, 301 West Preston Street, Baltimore, Maryland 21201. It is strongly recommended that any potential applicant complete registration prior to the due date for receipt of applications.

XI. HOW TO APPLY

An LOI and completed cover page (Aattachment A) must be emailed to christine.karayinopulos.@maryland.gov by 5:00pm Eastern Daylight Time on **August 25**, **2016**. The MHCC will extend invitations to selected applicants to submit full applications by September 9, 2016.

An applicant who is invited to submit a grant application must follow the requirements detailed below. Grant applications are due to MHCC by 5:00 p.m. Eastern Daylight Time on Thursday, September 29, 2016. Applications must be submitted via email to christine.karayinopulos.@maryland.gov.

All questions regarding this announcement for grant applications should be submitted via email to christine.karayinopulos.@maryland.gov; all questions and responses will be posted at http://mhcc.maryland.gov/mhcc/pages/hit/hit telemedicine/hit telemedicine grants.aspx

A. REQUIREMENTS FOR LETTER OF INTENT

The LOI must be prepared in a clear and precise manner and address all requested items, as described below, in **approximately 4.5 pages** and **must not exceed more than 2,500 words**. Original and innovative approaches to using telehealth are encouraged. The LOI **must** contain the following sections (page lengths provided are only guiding):

- 1. **Cover page:** A completed template cover page in <u>Attachment A</u> to this grant announcement
- 2. **Title of the project:** (One line)
- 3. **Objective** (.25 page): State the objective of the proposed telehealth project.
- 4. **Project description** (3 pages): Describe the proposed telehealth project and briefly outline tasks required to complete the project. Include the following elements in the project description:
 - What will the project do?
 - What is the overarching purpose of the project?
 - Who is the targeted population?
 - How many patients do you aim to include as project participants?
 - What technology will you be using and what are the capabilities?
 - How will the technology be developed and/or set up?
 - Describe the key programmatic components of the project, such as: (1) marketing and education for potential users, (2) training for health professionals and patients on use of technology, (3) implementation of telehealth encounter, and (4) assessment of program.
- 5. **Clinical Measures** (.25 page): Indicate the clinical measures you will be collecting and how they will be collected.
- 6. **Outcomes** (.25 page): Indicate the aims and expected benefits of the project

- If the project is successful, what results will you be able to report at the end of the project?
- What longer-term benefits do you expect for the target population and the broader community?
- 7. **Sustainability** (.25 page): Describe your plan for ensuring the project will continue once the grant term is completed.
- 8. **Qualifications** (.5 page): Briefly describe the organizations' experience in implementing telehealth initiatives or other relevant activities. You may include a link to organizations' web page(s).

B. REQUIREMENTS FOR APPLICATION

An application must address all requested items, as described below, in 15 or fewer pages. Items that were addressed in the LOI should be expanded upon with more detail to assist the evaluator in understanding specifically how the project will be implemented. Attachments B and C should be completed and submitted with this application.

1. *Scope of work*:

a. Scope of work and strategy. This section should describe the proposed telehealth project. It should address the requirements for each task and describe how the proposed services, including the services of any proposed sub-awardee(s), will meet or exceed the requirement(s). It should include a concise and detailed description of the scope, breadth, and plans/approach for completing each task described in Requirements (Section XI. A, above), including how the applicant plans to complete the tasks to the highest level of quality and in a timely manner.

The application should be structured using the sections detailed below, where relevant, technical architecture and clinical workflow diagrams should be used to depict the proposed telehealth project. Information submitted as appendices should be specific to support the application, and not technical brochures. Material in the appendices are not included in the total page count. The MHCC may request additional material, if needed for clarification, during evaluation of grant applications.

i. Project Description

- a) Describe the telehealth use case to be deployed. What will the project do? What is the overarching purpose of the project? Who are the participants?
- b) Describe the current conditions that the telehealth use case is expected to address. Explain the current relationship between the participants and the expected impact of the telehealth project.

- c) Who is the targeted population? How many patients do you aim to include as project participants? Why did you identify this population?
- d) Describe the role of the health professionals involved in the project and what their role will be? Who are the telehealth champions?
- e) What technology will you be using and what are the capabilities and shortcomings? How will the technology be developed and/or set up?
- f) What are the key programmatic components of the project including: (1) marketing and education for potential users; (2) training for health professionals and patients on use of technology; (3) implementation of telehealth encounter; and (4) assessment of program?
- g) What will be the benefits and measurements of success? If the project is successful, what visible, tangible, objectively verifiable results will you be able to report at the end of the project? What longer-term benefits do you expect for the target population and the broader community? What is the envisioned benefit of implementing telehealth technology?
- h) Will the funds be used to support initial technology investment(s) or expansion of existing telehealth programs?
- Demonstrate the applicant's ability to be able to go-live with proposed telehealth technology and clinical protocols of selected use case no later than 90 days of the award date.
- j) How will the project be sustained after grant support ends? Will the project require ongoing external support after the proposed grant ends?

ii. Project Plan

- a) What is the timeline for accomplishing specified tasks? As an example, prepare a Gantt chart or other timeline listing project tasks, the time period over which these tasks will be undertaken, and monthly milestones. The work plan chart may be attached as an appendix item to the application.
- b) The specific methodology and techniques to be used in executing the tasks should be included in this section.
- b. <u>Applicant qualifications</u>. Describe the qualifications of the organization(s) that will be participating in the tasks under the grant, including each organization's experience in performing similar work and, if applicable, work performed specifically related to assessing, developing, and managing telehealth. The applicant must demonstrate how it meets the Qualifications Requirements (Section VII above); please limit to one page.

- c. Experience and qualifications of the proposed staff. Describe the experience and qualifications of the proposed staff in performing similar work and, if applicable, work performed specifically related to telehealth. The grant applicant must demonstrate how its proposed staffing model meets the staffing requirements and required personnel described under Staffing and Personnel Requirements (Section IX, above), and, if applicable, as augmented by the applicant. Other essential staff, their roles in the project, and their relevant qualifications should be identified; please limit to one page.
- 2. *Proposed Milestones:* Using <u>Attachment B</u>, identify at least six months of milestones that will be demonstrated at the monthly site visits. The proposed milestones attachment is not included in the Scope of Work page count.
- 3. *Proposed Clinical Measures:* Using Attachment C, identify at least three clinical goals of the project that can be evaluated pre-and post-implementation (including in certain intervals during the implementation) of telehealth technology. The proposed clinical measures attachment is not included in the Scope of Work page count. The quality measures for each goal should be clear and verifiable, and aligned with a project objective. The goals must:
 - a. Include measure(s), key definitions for all terms of each measure, and a baseline definition (see table below for format);
 - b. Include a numerator and denominator, and identify how the numerator and denominator will be calculated; and
 - c. Include the source of the data that will be used.
- 4. *Additional documentation*: An applicant must include, as an appendix (appendices are not included in the Scope of Work page count) to the application:
 - a. *Financial proposal*: The financial proposal must include the costs of equipment proposed under the grant and the fully-loaded hourly rate for the work to be performed. Include an estimate of the total number of hours required to complete each task. Submit a budget for both award funds and matching funds using Attachment D. The financial proposal attachment is not included in the Scope of Work page count.
 - b. Letters of commitment: Letters of commitment to work on the project from personnel from each organization must be included as an appendix (appendices are not included in the Scope of Work page count) to the application. The letters of commitment should contain a brief description (approximately one paragraph) of the work to be performed for the project by that individual.
 - c. *Proof of partnership relationship* between all participating organizations must also be included in writing as an appendix.

- d. *Resumes:* An individual resume or detailed biography for each of the personnel who will be assigned if the applicant is awarded the grant.
- e. *Role of Sub-awardees*: Sub-awardees if any, must be identified; a detailed description of their contributing role(s) relative to the requirements must also be included in the application.
- f. *Liability Insurance:* Written commitment to provide proof of professional liability insurance coverage for use of telehealth by all partners within one month of receipt of grant award.
- g. *Disclosure*: Applicant must disclose any substandard quality of care level deficiencies, CMS admissions ban, and note any outstanding health and safety violations safety violations.
- h. *Demonstration of Technology:* Applicant must be prepared to demonstrate, if requested by MHCC, the technology or technologies it proposes to deploy as part of the project.

XII. CONDITIONS OF AN AWARD

In the event that MHCC determines that an awardee is not complying with the grant terms and requirements set forth in this application, MHCC may take one or more enforcement actions. These range from actions designed to allow the awardee to take corrective action, such as withholding payment or temporarily suspending an award, disallowing costs, recouping payments made, or terminating an award. Different processes apply depending on the type of enforcement action. If an enforcement action is planned, MHCC will notify the awardee and indicate the effect of the action. Additionally, MHCC may authorize a no-cost extension of the grant period in the event that more time is needed to demonstrate project objects. *Applicants are required to acknowledge in their grant application the conditions of an award*.

MINORITY BUSINESS ENTERPRISES AND SMALL BUSINESSES ARE ENCOURAGED TO APPLY XIII. ATTACHMENTS

Attachments can be found at:

http://mhcc.maryland.gov/mhcc/pages/home/procurement/procurement.aspx